



**ASSEMBLYMEMBER NOREEN EVANS**  
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**CONSTITUENT REQUEST FOR LEGISLATION  
BACKGROUND FORM**

DATE:

**SPONSOR:**

Name:

Organization:

Address:

Telephone:

Fax:

Email:

**PURPOSE OF BILL** (Problem/deficiency in existing law – attach proposed language, if available):

**STUDIES, REPORTS, STATISTICS & FACTS** (List all documented sources supporting your conclusion that a problem exists. Be specific and attach major sources):

**FISCAL IMPACT** (How much will it cost?):

**URGENCY** (Is this an emergency situation? Is there a deadline involved?):

**LIKELY POSITIONS** (List names and check either support or oppose):

Support   Oppose

Key Legislators (Policy/Fiscal Committee Chairs, etc.):

<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____

<input type="checkbox"/>	<input type="checkbox"/>	Department of Finance
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Affected State Agencies:

<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____

Interest Groups (If opposed, state precise reason)

<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____

**PRIOR OR SIMILAR LEGISLATION** (Bill number, author, session, and final action – attach):

**OTHER COMMENTS** (Is there anything else we should know about this issue?):